OR

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Attorney Docket Number HYT005US Kia Silverbrook **First Named Inventor COMPLETE IF KNOWN Application Number** Filing Date Group Art Unit **Examiner Name**

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☑ Declaration Submitted with Initial Filing

□ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

As a balance samed in											
As a below named inventor, I hereby declare that:											
My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original,	first and sole	e inventor (if only	y one name is listed belo	ow) or an original, f	rst and joint inve	entor (if plural					
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
Laser Scanner Using Rotating Holographic Optical Element											
the specification of which (Title of the Invention)											
(Title of the Invention)											
OR											
was filed on (MM/DD/YYYY) as United States Application Number or PCT International											
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable).										
I hereby state that I have r	eviewed and	understand the	contents of the above id	entified specification	n, including the	daims, as					
amended by any amendment specifically referred to above.											
I acknowledge the duty to	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.											
Prior Foreign Application Number(s)	Co	untry	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	opy Attached?					
2003901617	Australi	ia	April 7, 2003			⊠					
2003901795	2003901795 Australia		April 15, 2003			<u> </u>					
`											
			<u> </u>								
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:											
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.											
Application Number	r(s)	Filing Date	e (MM/DD/YYYY)								
				numb	onal provisiona ers are listed o emental priorit	on a					

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Application or PCT Parent								ling Date			nt Patent N			
		Numb	oer				(MM/DE	D/YYYY)	+	_	(if applicab	ie)	
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.														
		ereby appoint th innected therewi		Custon OR	ner Nun	nber	s) to prosecute this application and to transact all business in the Place Custome Number Bar Co					omer Code		
			<u> </u>	Registe		trationer(s)	name	registrat	tion number		w L	Registration		
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Additional	registered	practitioner(s)	named o	n supp	ementa	l Registered	d Prac	titioner lı	nformation s	neet PTO	/SB/020	attached here	eto.	
Direct all correspondence to: X Customer Number or Bar Code Label 24011 OR Correspondence address below														
Name	Kia S	ilverbrook												
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Address	393 1	Darling Stre	eet						- <u></u> -	<u>,</u>		•	-	
City	Balm	ain					s	State NSW ZIP 2			204	:041		
Country	Austr	alia		Te	elepho	ne 61-2	-9818-6633 Fax 6				61-	1-2-9555-7762		
believed to be punishable by	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									d belief are o made are alidity of the				
Name of S	Name of Sole or First Inventor:													
G	iven Nar	ne (first and n	niddle (i	f any])			Family Name or Surname							
	KIA					i	SILVERBROOK							
Inventor's Signature				\sim	7							Date	March 26, 2004	
Residence:	City	Balmain State NSW			NSW	, ا	Country Australia Citizenship Austra					Australian		
Post Office A	ddress	393 Darlir	ng Stre	eet										
Post Office A	ddress													
City		Balmain	State	NSV	N	ZIP	2	2041		Cou	ıntry	Australi	а	
□ Additional	invente	ara baina n	omod a			innloment	01 A d	ditional	Inventor(e)	choo#/s) PTO	SB/02A attac	shod borsts	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any]) Family Name or Surname											
		LAPSTUN									
Inventor's Signature		1	1					Date		arch 26, 004	
Residence: City	Balmain	State	NSW	Cou	intry	Australia		Citizensh	ip N	orwegian	
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Post Office Address											
City	Balmain	State	NSW	ZI	P 2	2041	Country		Aust	ralia	
Name of Addition	Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Na	me (first and middle [if any])		Family Name or Surname							
JAN				RUSMAN							
Inventor's Signature	14-R						Dat	e	March 26, 2004		
Residence: City	Balmain	State	NSW	Cou	untry	Australia		Citizen	ship	Australian	
Post Office Address	393 Darling Street										
Post Office Address											
City	Balmain	State	NSW		ZIP	2041	Cour	itry /	Austra	lia	
Name of Additio	nal Joint Inventor, if an	ıy:			petitio	n has been file	d for th	is unsign	ed inv	entor	
Given Na	Given Name (first and middle [if any]) Family Name or Surname										
		<u>-</u>									
Inventor's Signature								Dar	te		
Residence: City		State		Co	untry			Citizer	nship		
Post Office Address											
Post Office Address											
City		State		1	ZIP			Country			

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